

Practitioner's Docket No. KPER-4

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Kenneth Perlin

Application No.: 09/718,008

Filed: 11/21/2000

For: METHOD AND APPARATUS FOR NOISE

Group No.: 2672

Examiner: Jin Cheng Wang

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is a small entity. A statement was already filed.

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10*

(When using Express Mail, the Express Mail label number is **mandatory**;
Express Mail certification is optional.)

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

X deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

37 C.F.R. § 1.8(a)

X with sufficient postage as first class mail.

37 C.F.R. § 1.10*

☐ as "Express Mail Post Office to Addressee"
Mailing Label No. _____ (mandatory)

TRANSMISSION

☐ facsimile transmitted to the Patent and Trademark Office, (703) _____

Date: 11/1/05

Tracey L. Klaas
Signature

Tracey L. Klaas

(type or print name of person certifying)

* Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for three months:

Fee: \$510.00

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

| | (Col. 1) | (Col. 2) | (Col. 3) | SMALL ENTITY | | | |
|--|---|--------------------------------------|------------------|---------------------|---------------|------|--|
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NO PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDIT. FEE | | |
| TOTAL | 12 | — 20 | = 0 | x \$ 25.00 | = \$ | 0.00 | |
| INDEP. | 2 | — 3 | = 0 | x \$ 100.00 | = \$ | 0.00 | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | + \$ 0.00 | = \$ | 0.00 | |
| | | | | TOTAL ADDIT. FEE | \$ | 0.00 | |

No additional fee for claims is required.

FEE PAYMENT

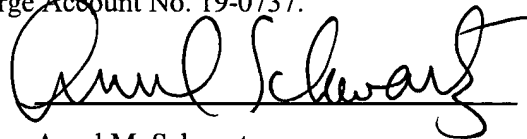
5. Attached is a check in the sum of \$510.00.

A duplicate of this paper is attached.

FEE DEFICIENCY

6. If an additional extension and/or fee is required, charge Account No. 19-0737.

If an additional fee for claims is required, charge Account No. 19-0737.



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